

RHODE ISLAND TRAILS ADVISORY COMMITTEE

MATERIALS ONLY GRANT APPLICATION - \$1,200 MAXIMUM GRANT AWARD

REVISED APRIL 2001

1. APPLICANT INFORMATION:

1. Applicant (Organization/Municipality)
2. Federal Employer's Identification Number (FEIN)
or Social Security Number of Contact Person

Address
3. Daytime Phone Number
- 4.
5. Have you completed other trail improvements or maintenance projects?

Yes No

If yes, describe

2. TRAIL INFORMATION:

Name and location of trail

Town

1. If the trail is located in any of the following, identify the facility
 - Urban Area
 - DEM Management Area or State Park
 - Town owned park/forest
 - Private Preserve

The appropriate DEM managing division must approve all projects on state land; a Town official must approve project on town land. Projects on private land must be approved by the landowner. Prior approval is required with this application. Landowner affidavit forms are available from DEM.

2. Will the trail be open to the public? Yes No
3. Length of trail to be improved?

3. PROJECT DESCRIPTION

1. Describe the project. What will be done?

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2. Identify the proximity of wetlands to the trail section to be improved.

The project section(s) goes through a wetland area, yes check box

No wetland nearby No check box:

4. PROJECT COST

1. Estimate Project Cost
2. Amount of grant award you are requesting.
3. Provide a complete list of all tools to be purchased and estimated cost.
4. Other sources of funding/volunteer labor.

Source	Type of Donation	# of Volunteers
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